



Washington State  
DEPARTMENT OF PERSONNEL

REQUEST FOR QUALIFICATIONS

FOR

WASHINGTON STATE EMPLOYEE ASSISTANCE  
PROGRAM  
NETWORK OF CONTRACTED PROVIDERS

RFQ #K293

August 25, 2008

[Revision 1 dated August 27, 2008](#)  
[Revision 2 dated October 17, 2008](#)

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## 1. INTRODUCTION

### 1.1 Background

The Department of Personnel (DOP) provides human resource leadership and solutions to enable state government to deliver public sector excellence.

As the central human resource agency for the state, DOP provides a full range of human resource services to state agencies, higher education institutions, state employees, and—in some instances—to other public sector and non-profit organizations.

DOP's Employee Assistance Program (EAP) is an internal employee assistance program located within Department of Personnel for Washington State employees, other governmental entities, and their family members. The EAP helps state employees with personal or work-related problems that may be impacting their work performance.

This Request for Qualifications (RFQ) is to acquire a network of qualified Employee Assistance Professionals to provide EAP services to state employees in targeted areas of the state. Eligible providers will be included into the network of potential providers.

Selected providers will be compensated at a Standard Fee of \$60.00 per EAP visit. This RFQ will remain open until such time DOP determines that the services is no longer needed or that it has enough Network Providers in any given area.

### 1.2 Scope and Objectives for this RFQ

It is the intent of this RFQ to identify a network of qualified providers to provide Employee Assistance services including [face-to-face](#) assessment, short term problem solving and referral to employees and eligible family members of Washington State on a referral basis. [\(Revised August 27, 2008\)](#)

### 1.3 Contract Term

Any Contract that may result from this RFQ will remain in effect for two (2) years. After that, the Contract may be renewed by mutual agreement of the parties. The Contract may be terminated as provided in the Contract terms and conditions.

### 1.4 Definitions

The following terms as used throughout this RFQ shall have the meanings set forth below.

**"Applicant"** shall mean a person or organization submitting an Application in response to this RFQ.

**"Application"** shall mean Applicant's response to this RFQ.

**"Client"** shall mean the individual employee or employee's family member who has been referred to the provider by the WA State EAP.

**"Contract"** shall mean Contracts, if any, that may result from this RFQ, including all attachments, amendments, and the Applicant's Application in response to this RFQ.

**"Department of Personnel"** or **"DOP"** shall mean the state of Washington Department of Personnel, any division, section, office, unit or other entity of DOP or any of the officers or other officials lawfully representing DOP.

**"EAP Client Record"** shall mean all records that Network Providers create and maintain in connection with providing services to a Client under this RFQ, including all forms and case notes the Network Provider completes or takes. The EAP Client Record includes at a minimum the following DOP/EAP forms:

- a. Statement of Understanding
- b. Client Intake Data Form
- c. Notice of Privacy Practices Acknowledgement Form
- d. Intake Assessment
- e. Recommendation and Case Closure Form
- f. Referral; Waiver Form
- g. Invoice form(s)
- h. Authorization for Release of information, if appropriate

**"Employee Assistance Program Services" or "EAP Services"** shall mean the set of services for which DOP has contracted with Network Provider to provide to its employees on an as needed, referral basis. Such services may include [face-to-face](#) assessment, short-term problem solving, and referral. ([Revised August 27, 2008](#))

**"Employer"** shall mean the entity that employs Client.

**"EAP Provider"** shall mean a behavioral health, substance abuse professional, or Employee Assistance Professional who has been approved by DOP and who is governed by this RFQ.

**"Emergency"** shall mean situations where the Client's circumstances require immediate intervention by the provider and will be seen or referred to an appropriate referral the same day.

**"Personal Services"** shall mean professional or technical expertise provided by Contractor to accomplish a specific study, project, task or duties as set forth in this RFQ. Personal Services shall include those services specified in the Office of Financial Management's (OFM) *Guide to Personal Service Contracting*, located at <http://www.ofm.wa.gov/psc/pschpt1.htm#A52>, (RCW 39.29.006(7) and OFM *State Administrative and Accounting Manual*, Chapter 15.10).

**"Network Provider"** shall mean the Applicant(s) with whom DOP enters into a contract as a result of the RFQ issued August 25, 2008. Network Provider includes any firm, organization, or individual performing work under the Contract.

**"RCW"** shall mean the Revised Code of Washington.

**"RFQ"** shall mean this Request for Qualifications used to competitively acquire Employee Assistance Program (EAP) Network of Contracted Providers.

**"Routine"** shall mean situations where the Client's circumstances do not require immediate intervention by the provider and an appointment can normally be scheduled within one to three business days.

**"Standard Fee"** shall mean fees DOP pays for the Services under this RFQ, which shall be paid in United States dollars.

**"Urgent"** shall mean situations where the Client's circumstances do not require immediate intervention by the provider, but are of sufficient severity to necessitate prompt intervention (within two business days of the initial Client contact).

**"Visit"** shall mean the [face-to-face](#) one hour period during which the Network Provider provides a minimum of 50 minutes of time with the Client and approximately 10 minutes of time creating and

maintaining EAP Client Record for that specific Client, not to exceed 60 minutes in total. Telephone time spent contacting or attempting to contact the Client shall not be included within the meaning of Visit, unless specifically authorized in advance by EAP. ([Revised August 27, 2008](#))

## 1.5 RFQ Authority

Chapter 39.29 of the Revised Code of Washington (RCW) as amended establishes a policy of open competition for all Personal Service contracts entered into by Washington State agencies. It also provides for legislative and executive review of all Personal Service contracts, to centralize the location of information about Personal Service contracts for ease of public review, and ensure proper accounting of Personal Services expenditures.

The Office of Financial Management (OFM) administers these statutes and has delegated to the Director of the Department of Personnel (DOP) the purchasing approval authority for this RFQ. This RFQ is in compliance with the policies and procedures for Personal Services.

This is a *Services for a Standard Fee* acquisition and is exempt from OFM filing requirements.

## 1.6 RFQ Process

Applicants' Application in response to this RFQ will first be evaluated to ensure that all Administrative Requirements and Mandatory Unscored Requirements have been met.

Applications that meet all Administrative Requirements and Mandatory Unscored Requirements will then be evaluated to ensure all Application Requirements have been met.

Applicants meeting all minimum Requirements shall be selected for the network of Contracted Providers.

## 2. ADMINISTRATIVE INFORMATION

### 2.1 RFQ Coordinator

The RFQ Coordinator is the sole point of contact for DOP regarding this RFQ. All communication between the Applicants and DOP upon release of this RFQ must be with the RFQ Coordinator, as follows:

Debbie Dunn, RFQ Coordinator  
Department of Personnel  
Contracts Office

Location Address:  
521 Capitol Way S  
Olympia, WA 98504-7500

Mailing Address:  
PO Box 47500  
Olympia, WA 98504-7500

E-mail: [DebbieD@dop.wa.gov](mailto:DebbieD@dop.wa.gov)

Phone: (360) 664-6309  
FAX: (360) 586-4694

### 2.2 Delivery Instructions

Applications and related documents must be sent to the RFQ Coordinator identified in Section 2.1, *RFQ Coordinator*. Applications may be delivered by hand, courier service or US Postal Service. Applicants mailing proposals should allow normal mail delivery time to ensure timely receipt of their proposals. Applicants assume all responsibility for the mode of dispatch used for delivery. DOP assumes no responsibility for delays caused by any delivery service. Delivery via facsimile will not be accepted.

- **US Postal Service:** For Applications and related documents delivered by the US Postal Service, Applicants are encouraged to use registered or at least first-class mail and to allow sufficient mailing time for delivery, including the state's Consolidated Mail services. Such mailings must be addressed to the RFQ Coordinator at the Post Office Box identified in Section 2.1, *RFQ Coordinator*.
- **Hand Delivery or Courier:** DOP will accept Applications delivered by hand or courier only during regular Business Hours. DOP's regular business hours are from 8:00 a.m. through 5:00 p.m. Monday through Friday, excluding state holidays. Applications and related documents are to be delivered by hand/courier services to the RFQ Coordinator at the street address identified in Section 2.1, *RFQ Coordinator*.

### 2.3 RFQ Targeted Schedule

DOP anticipates needing services in remote areas of the state. At this time DOP plans the following schedule for the locations listed for this RFQ. DOP reserves the right to revise the schedule at any time.

Locations	Targeted Date
Central Washington and Tri-Cities	Currently open
Vancouver	Winter 2008

### 2.4 Mandatory Requirements Defined

There are two types of Mandatory Requirements:

#### 2.4.1 Mandatory Unsourced Requirements (MUR) Defined

A Mandatory Unsourced Requirement (MUR) sets forth minimum requirements for the presentation of information, capabilities that must be provided, or required documentation which must be met by the Applicant. Failure of the Applicant to meet any one MUR will cause the entire Application to be deemed non-responsive, and Applicant's Application will be rejected from further consideration. All Mandatory Unsourced Requirements, denoted with an "(MUR)" appearing on the requirement heading line, are evaluated on a pass/fail basis only. No numerical score is credited for meeting Mandatory Unsourced Requirements.

Failure to meet a MUR shall constitute grounds for disqualification and shall be established by any of the following conditions:

1. The Applicant states a MUR cannot be met.
2. The Applicant fails to include information or documentation required by each MUR.
3. The Applicant fails to include sufficient information to substantiate that the given MUR can be met.

#### 2.4.2 Mandatory Scored Requirements (MSR) Defined

Applicants are required to respond to all scored requirements that are denoted by "(MSR)" on the requirement heading line. These responses will be evaluated and a score will be assigned by each evaluator based upon the quality and completeness of the Applicant's response. It is in the Applicant's best interest to be thorough and fully responsive in preparing Applicant's Application. Failure of the Applicant to respond to any one Mandatory Scored Requirement will result in a NO SCORE, which will cause

the entire Application to be deemed non-responsive, and Applicant's Application will be rejected from further consideration.

A Mandatory Scored Requirement may receive NO SCORE if the Applicant:

- Offers a response for the requirement that does not minimally meet the requested needs as determined by the Evaluation Team;
- Fails to include information requested in a MSR – a response of “will comply” or “meets requirements” is not sufficient;
- Fails to include sufficient information or documentation to substantiate the scoring of that requirement; or
- Fails to include references and attachments requested.

Applicants receiving NO SCORE for any one MSR will result in the entire proposal being deemed non-responsive and will constitute grounds for proposal rejection.

Applicants successfully meeting Mandatory Unscored Requirements will then be scored on these Mandatory Scored Requirements by the evaluation team using the scoring scale described in Section 5.3.2.2, *Evaluation Points*.

## **2.5 Applicant Questions**

Specific questions concerning this RFQ must be submitted in writing to the RFQ Coordinator at the email address given in Section 2.1, *RFQ Coordinator*. Copies of all written questions and DOP's responses will be available at a web site at [www.dop.wa.gov/EAP](http://www.dop.wa.gov/EAP). It is incumbent on Applicants to check the web site on a regular basis for such information. DOP's written responses, as published on the web site, will be the only official answers to questions. DOP shall be bound only to its written responses to questions.

## **2.6 Applicant Complaints**

If an Applicant believes that this RFQ unduly constrains competition, contains inadequate or improper criteria, or is being improperly used, the Applicant may submit a formal written complaint to the RFQ Coordinator.

The RFQ Coordinator will consider the Applicant's complaint(s) regarding any of the above issues or other specific RFQ requirements. The RFQ Coordinator will evaluate the validity of the complaint. DOP will make a good faith effort to notify the Applicant within (3) Business Days of DOP's decision and action to be taken, if any. If additional time is needed by DOP, the Applicant will be notified.

If, in the opinion of the RFQ Coordinator, DOP's decision imparts information potentially impacting the Applications of other Applicants, the complaint and solution will be posted on the RFQ web site at [www.dop.wa.gov/EAP](http://www.dop.wa.gov/EAP) after all information that identifies the complainant has been removed.

DOP reserves the right to modify this RFQ should an Applicant's complaint prove valid or identify a change that is in the best interest of DOP. Applicant complaints will not be handled through the Protest Procedure.

## **2.7 Cost of Preparing the Application**

DOP shall not be responsible for any costs incurred in the preparation of, or submission of the Application.

## **2.8 Cancellation and Re-issuance of this RFQ**

DOP reserves the right to cancel or reissue this RFQ in whole or in part, and for any reason at its sole discretion at any time prior to Contract execution. A single Application (i.e., from only one Applicant) to this RFQ may be deemed a failure of competition and, at the sole option of DOP, this RFQ may be canceled.

## **2.9 Award Notice**

Unsuccessful Applicants will be notified in writing at the address given in their Application. DOP reserves the right to award a Contract to Applicants it has determined, at its sole discretion, meets the requirements identified in this Request for Qualifications.

## **2.10 RFQ Modifications**

DOP reserves the right to modify this RFQ at any time. In the event it becomes necessary to revise any part of this RFQ, addenda will be provided at the RFQ web site at [www.dop.wa.gov/EAP](http://www.dop.wa.gov/EAP). It is incumbent on the Applicants to check the web site on a regular basis for such addenda.

## **2.11 Errors and Omissions in Application**

DOP will not be liable for any errors or omissions in Applicants' Applications. An Applicant will not be allowed to alter the Application after it has been submitted.

DOP reserves the right to make corrections or amendments due to errors identified in Applicants' Applications by DOP or the Applicant. This type of correction or amendment will only be for such errors such as typing, transposition, and any other obvious administrative/ministerial errors. All Applicant-initiated requests to alter Applications must be submitted in writing to, authorized by, and made by the RFQ Coordinator.

## **2.12 Waiver of Minor Administrative Irregularities**

DOP reserves the right, at its sole determination and discretion, to waive minor administrative irregularities contained in any Application.

## **2.13 Authority to Bind DOP**

The Director of DOP, and designee with written authority, are the only individuals who may legally commit DOP to the expenditures of public funds for a Contract. No cost chargeable to a Contract may be incurred before a Contract has been fully executed.

## **2.14 Application Based on RFQ**

Applications shall be based only on the material contained in this RFQ including any official amendments hereto, and on the official written DOP responses to written questions. The Applicant is to disregard any draft material and any oral representations it may have received. All responses to the requirements in this RFQ must clearly state whether the qualifications or proposed solution will satisfy the requirements, and provide all information that is specifically requested.



## 2.15 Withdrawal of Applications

Applicants may withdraw an Application that has been submitted at any time. To accomplish this, a written request signed by an authorized representative of the Applicant must be submitted to the RFQ Coordinator. After withdrawing a previously submitted Application, the Applicant may submit another Application at any time.

## 2.16 No Obligation to Contract

DOP reserves the right at its sole discretion to reject any and all proposals received without penalty and not to issue a contract as a result of this RFQ. DOP also reserves the right not to contract with any Applicant as a result of this RFQ.

## 2.17 Debriefing of Unsuccessful Applicants

Feedback for unsuccessful Applicants will be provided upon request. The RFQ Coordinator, or designee, will provide a critique of the requester's Application and a review of the scoring. The feedback will not include comparisons with other Applications or evaluations of the other Applications. The party requesting the feedback will have the opportunity to ask questions. The RFQ Coordinator will provide responses to questions, as the RFQ Coordinator deems appropriate. These sessions will be conducted via telephone conference.

## 2.18 Applicant Protests

Upon completion of the feedback conference, an Applicant may, within five (5) Business Days, file a formal protest of the acquisition with DOP. Further information regarding the filing and resolution of protests is contained in Attachment B, *Protest Procedures*.

# 3. ADMINISTRATIVE REQUIREMENTS

## 3.1 (MUR) Application Submission and Format

Applications must contain the following:

- One (1) original ~~paper copy~~ fully completed and signed Application Form (Attachment D);
- Copies of all required certifications and licenses (See section 4, Application Requirements);
- Copies of required insurance (See section 4, Application Requirements); and
- One (1) originally signed Certifications and Assurances (Attachment C). and
- ~~Three (3) complete copies of the entire original response.~~

~~The original paper copy shall have original signatures. All signatures must be original, or they will not be accepted.~~

Applications must be sent to the RFQ Coordinator's attention and be clearly marked with the RFQ number K293. All Applications and any accompanying documentation become the property of DOP and will not be returned.

~~The paper copy of the Application must be on 8½" x 11" paper and bound and tabbed for the sections of the Application as follows:~~

~~Tab 1: Responses to Section 3, Administrative Requirements~~

~~Tab 2: The Applicant's completed Application pursuant to Section 4, Application Requirements~~

~~Applicants must not use their own numbering system. Section numbering and titles must be identical to those in this RFQ.~~

Applicants must use the form provided in Attachment D, *Application*. Applications submitted in any other format shall be deemed non-responsive, and Applicant's Application will be rejected from further consideration. Non-responsive Applicants will be notified that to be considered, they will need to resubmit their Application using the *Application Template*. [\(Revised October 17, 2008\)](#)

### **3.2 (MUR) Proprietary Information, Confidentiality, and Public Disclosure**

Applications submitted in response to this RFQ are public records and are subject to Washington State public disclosure laws. Any information contained in the Response that an Applicant claims is proprietary or confidential must be clearly designated as such by placing the word "Proprietary" or "Confidential" on the lower right-hand corner of the page containing such information. Marking the entire Application as proprietary or confidential will not be honored.

If a request is made to view an Applicant's Application, DOP will comply according to the Public Disclosure Act, chapter 42.56 RCW and chapter 357-07 Washington Administrative Code. If any requested information is marked as proprietary or confidential in an Application, such information will not be made available until the affected Applicant has been given notice of the requested disclosure.

If any information is marked as proprietary in the Application, such information will not be made available until the affected Applicant has been given an opportunity to seek a court injunction against the requested disclosure.

DOP may charge a fee for the copying and shipping of materials outlined in Washington Administrative Code 357-07-050. No fee will be charged for inspection of files. Requests for information should be addressed to:

Department of Personnel  
Legal Affairs Division  
Sandi Stewart, Assistant Director  
PO Box 47500  
Olympia, WA 98504-7500

### **3.3 (MUR) Non-exclusive Rights**

~~By submitting an Application, the Applicant understands and agrees that, Nothing in this RFQ or any resulting Contract shall preclude DOP from purchasing other similar Services from other providers. [\(Revised October 17, 2008\)](#)~~

~~Applicant must state its acceptance of this Mandatory Unscored Requirement.~~

### **3.4 (MUR) Taxes**

~~By submitting an Application, the Applicant understands and agrees that, The the Provider must pay all taxes, including, but not limited to, Washington Business and Occupation Tax, taxes based on the Contractor's income, or personal property taxes levied or assessed on the Contractor's personal property to which DOP does not hold title. [\(Revised October 17, 2008\)](#)~~

~~Applicant must state its acceptance of this Mandatory Unscored Requirement.~~

### 3.5 (MUR) Certifications and Assurances

Attachment C, *Certifications and Assurances*, must be signed by the Applicant and returned in the *Administrative Requirement* portion of the Application.

### 3.6 (MUR) Subcontractor Information

Subcontracting is strictly prohibited. By submitting an Application, the Applicant understands and agrees that Applicants shall not subcontract any of the services to be performed under any resulting Contract. (Revised October 17, 2008)

Applicant must state its acceptance of this Mandatory Unscored Requirement.

### 3.7 (MUR) Contract Terms and Conditions

Selected Providers will be expected to enter into a Contract with DOP substantially in the form included with this RFQ as Attachment A, *Network of Contracted Provider Terms and Conditions*. The selected Provider's Application will be incorporated into the Contract, if any. The Contract is only provided for informational purposes to the Applicant. **Applicants are not to sign and return Attachment A with their Application.** If selected as a Provider, DOP will send a Contract to the Provider for signature. (Emphasis Added October 17, 2008)

In no event is an Applicant to submit its own standard or boilerplate contract terms and conditions as a response to this section.

Applicant must state its acceptance of the contract language in Attachment A, *Network of Contract Providers Terms and Conditions*.

### 3.8 (MUR) Account Representative (Deleted October 17, 2008)

Applicants must provide the following information pertaining to Applicant representative who has primary responsibility for the Applicant's Application and coordinating with DOP with respect to this RFQ:

- Name;
- Title;
- Address(es) (mailing and physical);
- Business telephone number;
- Fax number; and
- E-mail address.

### 3.9 (MUR) Physical Location

Applicants must be practicing in the geographical area for which they are applying.

## 4. APPLICATION REQUIREMENTS

### 4.1 Application Information

Using the form provided in Attachment D, *Application*, Applicant is to provide the following required information. If information requested on the form is not applicable (e.g. website address, etc.), state so.

The Applicant must provide the following information for the legal entity submitting the Application:

#### **(MUR) APPLICANT INFORMATION**

- Applicant's first, middle and last name (including suffix Jr., Sr., etc.);
- List any other name(s) under which you have been known by reference, licensing, or educational institution;
- Home mailing address (including PO Box if applicable);
- Mailing address;
- Home phone number;
- Work phone number;
- Cell phone number (if applicable);
- Email address;
- Website address (if applicable);
- Date of birth (month and day);
- Citizenship.
- Languages spoken by Applicant.

#### **(MUR) PRACTICE INFORMATION**

Indicate the area(s) for which you are proposing to provide services. Also, provide the following information about your practice:

- Practice name;
- Primary contact name, title,
- Telephone number;
- Mailing address (including PO Box if applicable);
- Billing address (if different);
- Email address;
- Office hours;
- Fax number;
- National Provider Identifier (NPI) number; and
- If the practice is ADA compliant.

#### **(MUR) MINORITY- AND/OR WOMEN-OWNED BUSINESS (MWBE) CERTIFICATION**

In accordance with the legislative findings and policies set forth in chapter 39.19 RCW, the state of Washington encourages participation in all its acquisitions and contracts by MWBE firms certified by the Office of Minority and Women's Business Enterprises (OMWBE). However, no preference will be included in the evaluation of Applications, no minimum level of Minority and Women Business Enterprise (MWBE) participation shall be required as condition to receive an award, and Applications will not be rejected or considered non-responsive on that basis. Applicants may contact OMWBE at (360) 753-9693 to obtain information on certified firms for potential subcontracting arrangements.

Certifications by other states are not applicable for this RFQ. If the applicant is Minority- or Woman-owned, but not OWMBE Certified, please state such on the form.

## **(MSR) PUBLIC EMPLOYEE INSURANCE PROVIDER**

DOP prefers Applicants that are approved providers for those insurance companies that provide coverage under the Public Employees Benefit Board (PEBB) to public employees such as Aetna, Uniform, Group Health (classic and value plans), Kaiser (classic and value plans). Applicant is to provide the names of the insurance companies for whom they are a provider under PEBB.

## **(MUR) UNDERGRADUTE EDUCATION**

- College or university names;
- Degree(s) received (be specific, e.g. BS, Biology);
- Graduation date(s) (mm/dd/yy); and
- College or university address(es).

## **(MUR) MASTER DEGREE PROGRAM OR POST GRADUTATE EDUCATION**

Applicants must have a Master Degree in a relevant field such as Behavioral Health, or Addiction, etc. For each institution, provide the following information:

- College or university name(s);
- Dates attended;
- Program/Degree(s) obtained;
- Graduation date; and
- Address(es).

## **(MUR) CERTIFICATION/LICENSURE**

Applicants must be licensed in the Washington State and submit a copy of their license with their application. For each licensure, provide the following information:

- Licensing Board Name;
- State;
- Specify Active or Inactive;
- Certificate/License number;
- Original issue date; and
- Expiration date.

## **(MSR) WORK HISTORY**

[Applicant must have a minimum of three \(3\) year post-graduate clinical experience.](#)

Applicants must list all work history activities since the completion of professional training. This information must be complete. A curriculum vitae is not sufficient to meet this requirement. Provide the following information for each: [\(Revised October 17, 2008\)](#)

### **Current Work History:**

- Name of current practice/employer;
- Contact name;
- Telephone number;
- Mailing address; and
- Dates of employment.

**Previous Work History:**

- Names of practice/employer;
- Contact names;
- Telephone numbers;
- Mailing addresses; and
- Dates of employment for each.

**For Gaps in Employment:**

Explain all gaps in employment between professional school graduation to the present that are not covered elsewhere within this application, including:

- The dates of employment gaps; and
- An explanation for the gaps in employment.

**(MUR) APPLICANT'S EMPLOYEE RELATIONSHIP WITH WASHINGTON STATE**

If any officer or employee of the Applicant named in any part of the Applicant's Application is or was an employee of Washington State during the twenty-four (24) months preceding the Application submission date, the Applicant must provide:

- The individual's name,
- Dates of employment;
- State agency where employed; and
- Position held.

If, following a review of this information, it is determined by DOP that a conflict of interest exists or may exist; the Applicant may be disqualified from further consideration at the sole discretion of DOP.

If the Applicant is not a current or previous state employee, Applicant must state so.

**(MUR) PROFESSIONAL LIABILITY INSURANCE**

At a minimum, Applicant must have the minimum types and amounts of insurance as outlined in this section. The intent of the required insurance is to protect the state should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Provider or subcontractor, or agents of either, while performing under the terms of the Contract. The Provider shall provide insurance coverage, which shall be maintained in full force and effect during the term of the Contract, as follows:

1. Commercial General Liability Insurance Policy. Provide a Commercial General Liability Insurance Policy, including contractual liability, in adequate quantity to protect against legal liability arising out of contract activity but no less than \$1,000,000 per occurrence.
2. Professional Malpractice Insurance. Provide Professional Malpractice Insurance Policy in adequate quantity to protect against legal liability arising out of contract activity but no less than \$1,000,000 per occurrence and \$3,000,000 aggregate.
3. Upon selection, the Provider will provide DOP with a copy of the applicable insurance face sheet(s) or certification of self-insurance reflecting these types of coverage and limits defined in this section. Insurance coverage(s) must be effective no later than the effective date of the Contract and for the term of the Contract. Provider shall submit renewal certificates as appropriate during the term of the Contract.

Upon selection, Applicant must submit to DOP a certificate of insurance that outlines the coverage and limits defined in the RFQ. Applications that do not include a certificate of insurance will not be considered.

Applicant must provide the following insurance information for each current policy(ies):

- Name of current insurance carrier;
- Policy number;
- Mailing address;
- Type of insurance from this carrier;
- Per claim amount;
- Aggregate amount;
- Phone number;
- Fax number;
- Date insurance began; and
- Expiration date.

### **(MSR) PEER REFERENCES**

Applicants must list at least three (3) professional references, from your specialty area, not including relatives, who have worked with you in the past two (2) years. References must be from individuals who through recent observation, are directly familiar with your work and can attest to your clinical competence in your specialty area. Reference information must include:

- Name of reference;
- Title and specialty;
- Relationship to applicant;
- Mailing address; and
- Phone number.

The references and other related referrals as appropriate will be contacted during the evaluation of the Application and the results of the contacts will be used to derive the evaluation score for this section. DOP reserves the right to limit its reference checks to a subset of those provided by the Applicant. DOP reserves the right to check other potential references known to DOP or identified in reference checks.

Scores for this section will be based on, but not be limited to, references as to the Applicant's ability to successfully perform the services outlined in this RFQ; the quality and timeliness of such services and the level and quality of customer focus demonstrated by the Applicant.

### **(MSR) PROFESSIONAL AFFILIATIONS**

Provide the following information for all memberships with professional societies:

- Complete name of society;
- Date joined; and
- Membership status (current/inactive).

## **(MSR) EMPLOYEE ASSISTANCE EDUCATION, EXPERIENCE AND CERTIFICATIONS**

Indicate your knowledge/work experience of the EAP core technology:

- Active status as a Certified Employee Assistance Professional (CEAP); **OR**
- Two (2) years of verifiable experience as an internal EAP Counselor, and/or as external EAP Consultant of other organizations.

Type 1: Management and/or union representation consultation on impact of personal problems on performance issues, appropriate use of constructive confrontation and role of EAP.

Type 2: Direct care function of EAP practice including [face-to-face](#) assessment/referral, short term counseling and linkages to treatment and/or community resources.  
[\(Revised August 27, 2008\)](#)

Type 3: Crisis Intervention including critical incident stress management (CISM) services.

Type 4: Training and experience in organizational dynamics/development, human resource management or industrial social work/psychology.

Type 5: Assessment and identification of drug, alcohol abuse/dependency problems and appropriate treatment interventions.

Additionally, for each of the types listed below, Applicant must provide:

- Dates of experience;
- Job title; and
- Employer's name and address.

## **(MSR) KNOWLEDGE/WORK EXPERIENCE IN ASSESSMENT/TREATMENT OF SUBSTANCE ABUSE**

On the Application form, indicate your knowledge/work in assessment/treatment of substance abuse by checking the appropriate box(es) for the following.

- Active status as a Certified Employee Assistance Professional (CEAP) with experience in the assessment/treatment of chemical dependency; or
- Possess one (1) year experience in a substance abuse treatment facility; or
- Completed a state level chemical dependency certification program; or
- Attainment of National Certified Addiction Counselor (NCAC) certification; or
- Possess International Certified Alcohol and Drug Counselor Certification (ICADC) or
- Possess a minimum of six (6) units of continuing education (CEU's, PDH's) in chemical dependency assessment/treatment within the last two (2) years. (Attach copies of the certificates).

Applicant must also provide the following information:

- Certification type;
- Certification number; and
- Expiration date (mm/dd/yy).

If Applicant possess one (1) year of experience in a substance abuse treatment facility, provide the following information:



- Treatment facility;
- Telephone number;
- Title;
- Dates of employment;
- Hours worked per week; and
- Duties.

#### **(MUR) PROVIDER ATTESTATION QUESTIONS**

Applicant must respond to all the questions in this section of the Application. If the answer to any of the questions is "yes", provide details as specified on a separate sheet. Additional sheets must be signed and dated by the Applicant.

#### **(MUR) PROVIDER APPLICATION AUTHORIZATION AND RELEASE OF INFORMATION FORM**

Applicant must read, sign and return Attachment D, *Application*.

## 5. EVALUATION/SELECTION PROCEDURES

The Evaluation process will be divided into two sections:

1. Administrative Screening: Covering all Mandatory Unsourced Requirements (MUR) and Mandatory Sourced Requirements (MSR) for compliance.
2. Application Evaluation: Covering Section 4, *Application Requirements*.

### 5.1 Basis for Evaluation

The Administrative Screening and Application evaluations will be evaluated on the basis of the information provided in the Applicants' Applications, and will include verification of Applicant information by references.

### 5.2 Application Evaluation Team

The RFQ Coordinator will assist with the evaluation process, and will conduct the Administrative Screening but will not evaluate Applications. The RFQ Coordinator will be responsible for ensuring that the evaluation process is conducted in a fair and equitable manner.

Evaluations and reference checks will be performed by an evaluation team composed of selected state technical and management staff. The RFQ Coordinator may contact the Applicant for clarification of any portion of the Applicant's Application. Team members will contact references to verify Applicant-provided information.

### 5.3 Evaluation Process

The evaluation process is described below.

#### 5.3.1 Administrative Screening

Applications will be reviewed by the RFQ Coordinator to determine if all Mandatory Unsourced Requirements and Mandatory Sourced Requirements are in compliance with Section 2.4.1, *Mandatory Unsourced Requirements (MUR) Defined*, and Section 2.4.2, *Mandatory Sourced Requirements (MSR) Defined*. All MURs will be screened on a pass/fail basis. The RFQ Coordinator will determine if all MSRs have been submitted with the Application and will screen each MSR to ensure that the Applicant has provided any required references or attachments.

Only Applications that pass the Administrative Screening will be further evaluated.

If all responding Applicants fail to meet any single Mandatory Unsourced or Mandatory Sourced Requirement, DOP reserves the following options:

- a) Cancel the procurement;
- b) Revise the mandatory item; or
- c) Delete the mandatory item.

Applications with all Mandatory Unsourced and Mandatory Sourced Requirements in compliance will progress to the next step of the Application evaluation: the Qualitative Review and Scoring.

### 5.3.2 Application Evaluation - Qualitative Review and Scoring

Applications that satisfactorily complete the Administrative Screening will be evaluated and scored based on responses to the Mandatory Scored Requirements in the RFQ. The evaluators will consider how well the Applicant's response to each MSR meets the needs of DOP/EAP. **It is important that the responses be clear and complete, so that the evaluators can adequately understand all aspects of the proposal.**

The Application Evaluation Team will score the Mandatory Scored Requirements as specified in Section 4, *Application Requirements*.

#### 5.3.2.1 Evaluation Criteria and Scoring Techniques

Scoring will use evaluation criteria that will be developed by DOP prior to the receipt of Applicant Applications. Using these criteria, each Mandatory Scored Requirement will be given a score by each evaluator. Each of the evaluation team members will score independently of one another. Upon completion of individual scoring, the team will meet to determine a consensus score for each scored item. The consensus score will be the final score used for the tabulation process.

#### 5.3.2.2 Evaluation Points

Points will be assigned based on the quality of the Applicant's response to each of the items being scored. A scale of "1" to "5" will be used for scoring Technical and Management MSRs, where the range is defined as follows:

- 1 = ~~Poor~~[Meets Minimum Requirements](#)
- 2 = ~~Below Average~~
- 3 = ~~Average~~[Has Above Minimum Requirements](#)
- 4 = ~~Good~~
- 5 = ~~Excellent~~[Exceeds Minimum Requirements](#)

A NO SCORE will be given to MSRs that fail to meet the conditions outlined in Section 2.4.2, *Mandatory Scored Requirements (MSR) Defined*.  
[\(Revised October 17, 2008\)](#)

### 5.4 Selection of Providers

The evaluation process is designed to award any resulting Contract to Applicants with the best combination of attributes based upon the evaluation criteria. Selected Providers will be notified in writing and sent a contract for signature.

Applicants eliminated from further competition will be notified by DOP as soon as practical.

\*\*\*\*\* The remainder of this page intentionally left blank. \*\*\*\*\*

**ATTACHMENT A**

**NETWORK OF CONTRACTED PROVIDER TERMS AND CONDITIONS**

(PROVIDED IN A SEPARATE ELECTRONIC DOCUMENT)

## **PROTEST PROCEDURES**

### **Grounds For Protest**

Protests may be made after DOP has notified the unsuccessful Applicant and after the protesting Applicant has had a feedback conference with DOP. Protests may be made on only these grounds:

- Arithmetic errors were made in computing the score.
- DOP failed to follow procedures established in this RFQ document.
- There was bias, discrimination, or conflict of interest on the part of an evaluator.

### **Protest Process**

Protests are initially made to the RFQ Coordinator. The protest letter must be signed by a person authorized to bind the Applicant to a contractual relationship. DOP must receive the written protest within five (5) business days after the feedback conference.

Staff not involved in the protested acquisition will objectively review the written protest material submitted by the Applicant and all other relevant facts known. A copy of the decision will be delivered to the protesting Applicant within five (5) business days after the protest was received, unless more time is needed. The protesting Applicant will be notified if additional time is necessary.

If the protesting Applicant is not satisfied with DOP's decision, it may appeal. Appeal is made to the Administrative Services Division's Assistant Director of DOP. The Assistant Director may delegate the review of the appeal if he/she deems appropriate. The appeal process is discussed below.

Written notice of appeal to Administrative Services Division's Assistant Director must be received within five (5) business days after the Applicant receives notification of the agency's decision.

In conducting the appeal review, the Administrative Services Division's Assistant Director, or designee, will consider all available relevant facts. The Administrative Services Division's Assistant Director, or designee, will resolve the appeal in one of the following ways:

- Find that the protest lacks merit and uphold DOP's action.
- Find only technical or harmless errors in DOP's acquisition process, determine DOP to be in substantial compliance, and reject the protest; or
- Find merit in the protest and provide options to DOP, including:
  - Correcting errors and reevaluating all proposals;
  - Reissuing the RFQ document; or
  - Making other findings and determining other courses of action as appropriate.

The Administrative Services Division's Assistant Director, or designee, will issue a written decision within ten (10) business days after receipt of the notice of appeal, unless more time is needed. The protesting Applicant will be notified if additional time is necessary. The Administrative Services Division's Assistant Director, or designee, determination is final; no further administrative appeal is available.

### **Form and Content**

A written protest must contain the facts and arguments upon which the protest is based and must be signed by a person authorized to bind the Applicant to a contractual relationship. At a minimum, this must include:

- The name of the protesting Applicant, its mailing address and phone number, and the name of the individual responsible for submission of the protest.
- Number and title of the RFQ.
- Specific and complete statement of the agency action(s) protested.
- Specific reference to the grounds for the protest.
- Description of the relief or corrective action requested.
- A copy of the initial written decision on the protest that is being appealed to the Administrative Services Division's Assistant Director.

### CERTIFICATION AND ASSURANCES

Applicant makes the following certifications and assurances as a required element of the Application to which it is attached, understanding the truthfulness of the facts affirmed here and the continuing compliance with these requirements and all requirements of the Request for Qualification (RFQ) are conditions precedent to the award or continuation of the related Contract.

1. In preparing this Application, Applicant has not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to the DOP's RFQ, or prospective Contract, and who was assisting in other than his or her official, public capacity. Neither does such a person nor any member of his or her immediate family have any financial interest in the outcome of this Application. (Any exceptions to these assurances are described in full detail on a separate page and attached to this document.)
2. Applicant understands that the State will not reimburse them for any costs incurred in the preparation of this Application. All Applications become the property of the state, and Applicant claims no proprietary right to the ideas, writings, items or samples unless so stated in the Application. Submission of the attached Application constitutes agreement to the procedures, evaluation criteria, administrative and other requirements described in this RFQ document.
3. Applicant understands that its Application become a public record under chapter 42.56 RCW and may be disclosed in accordance with public disclosure laws.
4. Applicant agrees to comply with the Americans with Disabilities Act.
5. Applicant grants permission to DOP to contact all references provided in the Applicant's Application, and to check other potential references known to DOP or identified in reference checks.
6. Applicant understands that the selected Providers will be expected to enter into a Contract with DOP that is substantially similar to the contract terms and conditions included with this RFQ as Attachment A, *Network of Contracted Provider Terms and Conditions*. Applicant certifies that it will comply with these or substantially similar Terms and Conditions if selected as the Contractor.

It is further understood that under no circumstances will an Applicant-submitted contract/agreement be considered as a replacement for the terms and conditions appearing in Attachment A, *Network of Contracted Provider Terms and Conditions*, of this RFQ.

7. Applicant agrees that if awarded a Contract with DOP as a result of this RFQ, Applicant will adhere to the Mandatory Requirements of this RFQ and Applicant's commitments submitted in its Application in response to this RFQ.

I certify that I am the \_\_\_\_\_ (title) of the \_\_\_\_\_  
(organization name) and am authorized to submit this Application on behalf of my organization. The information submitted with this Application is accurate and true to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date

**APPLICATION**

(PROVIDED IN A SEPARATE ELECTRONIC DOCUMENT)